
State:	Arkansas	Filing Company:	Starmount Life Insurance Company
TOI/Sub-TOI:	L07I Individual Life - Whole/L07I.101 Fixed/Indeterminate Premium - Single Life		
Product Name:	GIWL - Interest Rate		
Project Name/Number:	/		

Filing at a Glance

Company:	Starmount Life Insurance Company
Product Name:	GIWL - Interest Rate
State:	Arkansas
TOI:	L07I Individual Life - Whole
Sub-TOI:	L07I.101 Fixed/Indeterminate Premium - Single Life
Filing Type:	Form
Date Submitted:	11/13/2012
SERFF Tr Num:	STAR-128766985
SERFF Status:	Closed-Approved-Closed
State Tr Num:	
State Status:	Approved-Closed
Co Tr Num:	
Implementation	01/01/2013
Date Requested:	
Author(s):	Belle Lucas, Natka Varisco, Ruston Woolley, Jennifer LeGlue
Reviewer(s):	Linda Bird (primary)
Disposition Date:	11/26/2012
Disposition Status:	Approved-Closed
Implementation Date:	
State Filing Description:	

State: Arkansas
TOI/Sub-TOI: L071 Individual Life - Whole/L071.101 Fixed/Indeterminate Premium - Single Life
Product Name: GIWL - Interest Rate
Project Name/Number: /

Filing Company: Starmount Life Insurance Company

General Information

Project Name: Status of Filing in Domicile: Pending
Project Number: Date Approved in Domicile:
Requested Filing Mode: Domicile Status Comments:
Explanation for Combination/Other: Market Type: Individual
Submission Type: New Submission Individual Market Type:
Overall Rate Impact: Filing Status Changed: 11/26/2012
State Status Changed: 11/26/2012
Deemer Date: Created By: Natka Varisco
Submitted By: Natka Varisco Corresponding Filing Tracking Number:

Filing Description:

We are submitting an informational filing to advise you of the Valuation Interest Rate Change on the following products:

Product Name Policy Form Number Approval Date SERFF Filing number

ValueLife Gold 32-001 12/5/2008 STAR-125904769

StarLife Gold 21-001 12/4/2006 STAR-125010980

SelectLife 51-001 8/23/2006 USPH-6SQJ6M898/00-00/00-00/00

GIWL 42-001 11/30/2010 STAR-126916255

The Interest rate on the above listed products will change from 4% to 3.5%. This change will become effective on new policies issued beginning January 1, 2013.

I have attached a revised Speculations page highlighting the new interest rate.

All other product design features are identical to those of the forms previously approved.

Company and Contact

Filing Contact Information

Ruston Woolley, Compliance Specialist rustonb@starmountlife.com
8485 Goodwood Blvd. 225-400-9247 [Phone]
Baton Rouge, LA 70806-7878 225-610-1447 [FAX]

Filing Company Information

Starmount Life Insurance Company	CoCode: 68985	State of Domicile: Louisiana
7800 Office Park Boulevard	Group Code:	Company Type:
Baton Rouge, LA 70809	Group Name:	State ID Number:
(225) 926-2888 ext. [Phone]	FEIN Number: 72-0977315	

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00

SERFF Tracking #: STAR-128766985

State Tracking #:

Company Tracking #:

State: Arkansas **Filing Company:** Starmount Life Insurance Company
TOI/Sub-TOI: L071 Individual Life - Whole/L071.101 Fixed/Indeterminate Premium - Single Life
Product Name: GIWL - Interest Rate
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Retaliatory? No

Fee Explanation:

Per Company: No

Company	Amount	Date Processed	Transaction #
Starmount Life Insurance Company	\$50.00	11/13/2012	64852679

SERFF Tracking #:	STAR-128766985	State Tracking #:	Company Tracking #:
State:	Arkansas	Filing Company:	Starmount Life Insurance Company
TOI/Sub-TOI:	L071 Individual Life - Whole/L071.101 Fixed/Indeterminate Premium - Single Life		
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Project Name/Number:	/		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	11/26/2012	11/26/2012

SERFF Tracking #:	STAR-128766985	State Tracking #:	Company Tracking #:
State:	Arkansas	Filing Company:	Starmount Life Insurance Company
TOI/Sub-TOI:	L071 Individual Life - Whole/L071.101 Fixed/Indeterminate Premium - Single Life		
Product Name:	GIWL - Interest Rate		
Project Name/Number:	/		

Disposition

Disposition Date: 11/26/2012

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Form	GIWL		Yes

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TOI/Sub-TOI:	L071 Individual Life - Whole/L071.101 Fixed/Indeterminate Premium - Single Life		
Product Name:	GIWL - Interest Rate		
Project Name/Number:	/		

Form Schedule

Lead Form Number:									
Item No.	Schedule Item Status	Form Name	Form Number	Form Type	Form Action	Action Specific Data		Readability Score	Attachments
1		GIWL	42-001-AR	SCH	Revised	Previous Filing Number:			42-001-AR revised spec.pdf
						Replaced Form Number:	STAR-126916255		

Form Type Legend:

ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NOC	Notice of Coverage
OTH	Other	OUT	Outline of Coverage
PJK	Policy Jacket	POL	Policy/Contract/Fraternal Certificate
POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	SCH	Schedule Pages

**STARMOUNT LIFE INSURANCE COMPANY
GUARANTEED ISSUE WHOLE LIFE**

OWNER: [John Atkinson]
BENEFICIARY: [Helen Atkinson, wife]
PREMIUM CLASS: Non-Smoker
BENEFITS and PREMIUMS:

			PREMIUM			
			CURRENT		GUARANTEED MAXIMUM	
FORM #	BENEFIT	PREMIUM PERIOD	ANNUAL PREMIUM	MONTHLY PREMIUM	ANNUAL PREMIUM	MONTHLY PREMIUM
42-001	Modified Indeterminate Premium Permanent Whole Life	Life	\$388.20	\$32.35	\$582.36	\$48.53
	TOTAL		\$388.20	\$32.35		

*These are the guaranteed maximum premiums after the first policy year the highest premiums that can ever be charged.

This policy has limited benefits for non-accidental death in the first two policy years. See the schedule below for details.

See definition of Accidental Death on page 6.

The first billing is for 2 month's premiums

INSURED: [John Atkinson]

AGE & SEX: [65, Male]

POLICY NUMBER: L111129449

AMOUNT OF INSURANCE IN EFFECT:

Policy Year	Accidental Death	Death From All Other Causes
1	\$5,000	[value taken from table 1]
2	\$5,000	[value taken from table 1]
3+	\$5,000	\$5,000

POLICY DATE: January 3, 2006

[Table 1: Death Benefits per Unit of Coverage (\$)

Issue age	Policy year 1	Policy year 2	Policy year 3+
45-54	28.00	56.00	1000.00
55-64	40.00	80.00	1000.00
65-70	60.00	120.00	1000.00
71-75	88.00	176.00	1000.00]
76+	125.00	250.00	1000.00

STARMOUNT LIFE INSURANCE COMPANY

INSURED: John Atkinson
AGE & SEX: 65, Male

POLICY NUMBER: L111129449
RISK CLASS: Non-Smoker

TABLE OF GUARANTEED POLICY VALUES

For explanation of Table, see Page 7

<u>END OF YEAR</u>	<u>CASH VALUE</u>	<u>PAID UP INSURANCE</u>
1	0.00	0.00
2	193.05	390.00
3	339.00	665.00
4	487.45	930.00
5	638.15	1180.00
6	790.40	1420.00
7	943.15	1645.00
8	1095.35	1855.00
9	1247.30	2060.00
10	1399.15	2250.00
11	1550.90	2430.00
12	1701.95	2605.00
13	1851.35	2765.00
14	1997.80	2920.00
15	2140.70	3060.00
16	2279.40	3190.00
17	2413.65	3315.00
18	2543.90	3430.00
19	2669.95	3535.00
20	2791.15	3635.00

NON-FORFEITURE BASIS: Commissioners 2001 Standard Ordinary Mortality Table
Sex Distinct, Smoker Distinct with Interest at [5%].

VALUATION BASIS: Commissioners 2001 Standard Ordinary Mortality Table
Sex Distinct, Smoker Distinct with Interest at [3.5%].

THE PARTIES IN THIS POLICY

The Parties

In this policy, the word **we** refers to **Starmount Life Insurance Company**. **You** means the owner of the policy named on page 3.

We have issued this policy to you on the life of the **Insured** named on page 3. As the owner, you can exercise the rights described in this policy.

If you are not the insured, you can name a **contingent owner**. The contingent owner would be the party to whom ownership of this policy would pass if you die before the insured. If there is no contingent owner, ownership would pass to your estate.